



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Ulrich Doering et al.
Serial No. : 10/714,450
Filed : November 17, 2003
Title : OPERATING TABLE

Art Unit : 3673
Examiner : Unknown

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

DECLARATION BY THE INVENTOR

As a below-named inventor(s), I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OPERATING TABLE

the specification of which:

was filed on November 17, 2003, as Application Serial No. 10/714,450, and further identified as Attorney Docket No. 15540-016001.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 CFR §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate

or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Country	Application No.	Filing Date	Priority Claimed
Germany	102 53 846.8-45	November 15, 2002	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of inventor: ULRICH DOERING

Inventor's signature: 

Date: 22.3.04

Residence: Saalfeld, Federal Republic of, Germany

Citizen of: Germany

Post Office Address: Kelzstrasse 43, D-07318 Saalfeld, Federal Republic of Germany

Full name of inventor: CHRISTIAN STREITBERGER

Inventor's signature: 

Date: 22.03.04

Residence: Saalfeld, Federal Republic of, Germany

Citizen of: Germany

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Attorney's Docket No.: 15540-016001 / A 100 504 c

Full name of inventor: FALK ^{Georgi} ~~GEROGI~~
Inventor's signature: Falk Georgi
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Residence: Unterwirbach, Federal Republic of, Germany
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POWER OF ATTORNEY BY ASSIGNEE AND ELECTION OF
ASSIGNEE TO CONDUCT PROSECUTION TO EXCLUSION OF INVENTORS

The undersigned, as authorized representative of the assignee of the entire right, title and interest in the above-identified application, hereby appoints

ATTORNEY James W. Babineau
Reg. No. 42,276

ATTORNEY J. Peter Fasse
Reg. No. 32,983

ATTORNEY John F. Hayden
Reg. No. 37,640

ATTORNEY Frank P. Porcelli
Reg. No. 27,374

ATTORNEY Mark W. Bellermann
Reg. No. 47,419

ATTORNEY Timothy A. French
Reg. No. 30,175

as its attorney to prosecute the application and to transact all business in the Patent and Trademark Office connected therewith with full powers of substitution and revocation, said appointment to be to the exclusion of the inventors and their attorney(s) in accordance with the provisions of 37 CFR §3.71 *et seq.* of the Patent Office Rules of Practice.

The documents evidencing ownership have been reviewed and to the best of the assignee's knowledge and belief, title is in the assignee.

Please direct all communications regarding the application to the attorney at the address and telephone numbers indicated below.

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Signature:  _____

Typed name: Peter Hopfe

Date: 2004-03-23

Title: General Manager

Assignee: Trumpf Medizin Systeme GmbH

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